

**MOTOROLA**
FAX TRANSMITTAL SHEET

Motorola, Inc.
Intellectual Property Section
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11

Number of Pages (including this page)

Date: 6/23/05

To: Commissioner for Patents

Location: United States Patent and Trademark Office

Fax No.: (703) 872-9306

From: Hisashi D. Watanabe

Registration No. 37,465

Subject: Serial No. 10/001,770

Docket No. PF02133NA

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MESSAGE:

Enclosed herewith, please find:

- ☒ Amendment (7 pages)
- ☒ Amendment Transmittal Form
- ☒ Fee Transmittal Form
- ☒ Petition for Extension of Time

PLEASE GIVE THESE PAPERS TO:

EXAMINER:
GROUP ART UNIT:
SERIAL NO.:
FILED:
INVENTOR:

Cho, Un C.
2687
10/001,770
10/23/2001
Mihyala, Srinivas

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

ADMENDMENT TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/001,770
	Filing Date	10/23/2001
	First Named Inventor	Miriyala, Srinivas
	Group Art Unit	2687
	Examiner Name	Cho, Un C.
	Attorney Docket Number	PF02133NA

ENCLOSURES (Check all that apply)

<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached	<input type="checkbox"/> Assignment Papers (for an Application)	<input type="checkbox"/> After Allowance Communication to Group
<input checked="" type="checkbox"/> Amendment/Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s)	<input type="checkbox"/> Drawing(s)	<input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences
<input checked="" type="checkbox"/> Extension of Time Request	<input type="checkbox"/> Licensing-related Papers	<input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief)
<input type="checkbox"/> Express Abandonment Request	<input type="checkbox"/> Petition Routing Slip (PTO/SB/69) and Accompanying Petition	<input type="checkbox"/> Proprietary Information
<input type="checkbox"/> Information Disclosure Statement	<input type="checkbox"/> Change of Correspondence Address	<input type="checkbox"/> Status Letter
<input type="checkbox"/> Certified Copy of Priority Document(s)	<input type="checkbox"/> Fee Address Indication Form	<input type="checkbox"/> Additional Enclosure(s) (please identify below)
<input type="checkbox"/> Response to Missing Parts Incomplete Application	<input type="checkbox"/> Terminal Disclaimer	
<input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Small Entity Statement	
	<input type="checkbox"/> Request for Refund	
Remarks:		

CORRESPONDENCE ADDRESS

<input type="checkbox"/> Customer Number or Bar Code Label	20280 (Insert Customer No. or Attach bar code label here)	or <input type="checkbox"/> Correspondence address below	
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	600 North U.S. Highway 45, AN475		
City: Libertyville	State: Illinois	Zip Code:	60048
Country: USA	Telephone: 847-523-2322	Fax:	847-523-2350
Name (Print/Type) Hisashi D. Watanabe	Registration No. 37,465		
Signature <i>Hisashi D. Watanabe</i>	Date 06/23/05		

CERTIFICATE OF TRANSMISSION

I hereby certify that this correspondence is being facsimile transmitted to the United States Patent Office at (703) 872-9306 on this date: 6/23/05

Typed or printed name: Jennifer Magness
Signature *Jennifer Magness*

Date 6/23/05

FEE TRANSMITTAL Patent fees are subject to annual revision <input type="checkbox"/> Applicant claims small entity status. See 37 CFR 1.27		RECEIVED CENTRAL FAX CENTER JUN 23 2005		Complete if Known	
		Application Number: 10/001,770			
		Filing Date: 10/23/2001			
		First Named Inventor: Miriyala, Srinivas			
		Examiner Name: Cho, Un C.			
		Group Art Unit: 2687			
TOTAL AMOUNT OF PAYMENT: (\$) 120.00		Attorney Docket No.: PF02133NA			

METHOD OF PAYMENT (check all that apply)				FEE CALCULATION (continued)																																																																																																																											
<input checked="" type="checkbox"/> Check <input type="checkbox"/> Credit card <input type="checkbox"/> Money Order <input type="checkbox"/> Other <input type="checkbox"/> None	<input checked="" type="checkbox"/> Deposit Account: Deposit Account Number: 502117 Deposit Account Name: Motorola, Inc.			4. ADDITIONAL FEES																																																																																																																											
<input checked="" type="checkbox"/> The Director is authorized to: (check all that apply) <input checked="" type="checkbox"/> Charge fee(s) indicated below <input checked="" type="checkbox"/> Charge any additional fee(s) or underpayments of fee(s) under 37 CFR 1.16 and 1.17 <input type="checkbox"/> Charge fees(s) indicated below, except for the filing fee to the above-identified deposit account.				<table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Large Entity</th> <th>Small Entity</th> <th>Fee Description</th> <th></th> </tr> <tr> <th>Fee Code (\$)</th> <th>Fee Code (\$)</th> <th></th> <th></th> </tr> </thead> <tbody> <tr><td>1051</td><td>130</td><td>2051</td><td>65</td></tr> <tr><td>1052</td><td>50</td><td>2052</td><td>25</td></tr> <tr><td>1053</td><td>130</td><td>1053</td><td>130</td></tr> <tr><td>1812</td><td>2520</td><td>1812</td><td>2520</td></tr> <tr><td>1804</td><td>920</td><td>1804</td><td>920</td></tr> <tr><td>1805</td><td>1840</td><td>1805</td><td>1840</td></tr> <tr><td>1251</td><td>120</td><td>2251</td><td>60</td></tr> <tr><td>1252</td><td>450</td><td>2252</td><td>225</td></tr> <tr><td>1253</td><td>1020</td><td>2253</td><td>510</td></tr> <tr><td>1254</td><td>1590</td><td>2254</td><td>795</td></tr> <tr><td>1255</td><td>2160</td><td>2255</td><td>1080</td></tr> <tr><td>1401</td><td>500</td><td>2401</td><td>250</td></tr> <tr><td>1402</td><td>500</td><td>2402</td><td>250</td></tr> <tr><td>1403</td><td>1000</td><td>2403</td><td>500</td></tr> <tr><td>1451</td><td>1510</td><td>1451</td><td>1510</td></tr> <tr><td>1452</td><td>500</td><td>2452</td><td>250</td></tr> <tr><td>1453</td><td>1500</td><td>2453</td><td>750</td></tr> <tr><td>1501</td><td>1400</td><td>2501</td><td>700</td></tr> <tr><td>1502</td><td>800</td><td>2502</td><td>400</td></tr> <tr><td>1503</td><td>1100</td><td>2503</td><td>550</td></tr> <tr><td>1480</td><td>130</td><td>1480</td><td>130</td></tr> <tr><td>1807</td><td>50</td><td>1807</td><td>50</td></tr> <tr><td>1806</td><td>180</td><td>1806</td><td>180</td></tr> <tr><td>8021</td><td>40</td><td>8021</td><td>40</td></tr> <tr><td>1809</td><td>790</td><td>2809</td><td>395</td></tr> <tr><td>1810</td><td>790</td><td>2810</td><td>395</td></tr> <tr><td>1801</td><td>790</td><td>2801</td><td>395</td></tr> <tr><td>1802</td><td>900</td><td>1802</td><td>900</td></tr> </tbody> </table>				Large Entity	Small Entity	Fee Description		Fee Code (\$)	Fee Code (\$)			1051	130	2051	65	1052	50	2052	25	1053	130	1053	130	1812	2520	1812	2520	1804	920	1804	920	1805	1840	1805	1840	1251	120	2251	60	1252	450	2252	225	1253	1020	2253	510	1254	1590	2254	795	1255	2160	2255	1080	1401	500	2401	250	1402	500	2402	250	1403	1000	2403	500	1451	1510	1451	1510	1452	500	2452	250	1453	1500	2453	750	1501	1400	2501	700	1502	800	2502	400	1503	1100	2503	550	1480	130	1480	130	1807	50	1807	50	1806	180	1806	180	8021	40	8021	40	1809	790	2809	395	1810	790	2810	395	1801	790	2801	395	1802	900	1802	900
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FEE CALCULATION							
1. BASIC FILING, SEARCH, AND EXAMINATION FEES							
Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fee Paid (\$)
	Large Fee (\$)	Small Entity Fee (\$)	Large Fee (\$)	Small Entity Fee (\$)	Large Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

2. EXTRA CLAIM FEES							
Each claim over 20 or, for Reissues, each claim over 20 and more than in the original patent Each independent claim over 3 or, for Reissues, each independent claim more than in the original patent Multiple Dependent Claims							
Total Claims	Edm Claims	Fee (\$)	Fee Paid (\$)	Multiple Dependent Claims			
6	- 20 or HP = 0	X 50 = 0		Fee (\$)	Fee Paid (\$)		
HP = highest number of total claims paid for, if greater than 3				360			
Indep. Claims	Extra Claims	Fee (\$)	Fee Paid (\$)				
2	- 3 or HP = 0	X 200 = 0					

3. APPLICATION SIZE FEE							
If the specification and drawings exceed 100 sheets of paper, the application size fee is \$250 (\$125 for small entity) For each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(a).							
Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)			
	- 100 =	50 =	(round up to a whole number) X 250 =				

5. OTHER FEE(S) (specify)			
Non-English Specification, \$130 fee (no small entity discount)			
Fee Paid (\$): \$120.00			

SUBMITTED BY			
Name (Print/Type)	Hisashi D. Watanabe	Registration No.	37,465
Signature	<i>Hisashi D. Watanabe</i>	Telephone	847-523-2322
		Date	06/23/05